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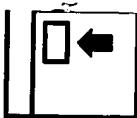
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HOW TO USE:



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Addressee Copy
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UNITED STATES POSTAL SERVICE®

Post Office To Addressee

ORIGIN (POSTAL USE ONLY)				DELIVERY (POSTAL USE ONLY)			
PO ZIP Code		Day of Delivery		Delivery Attempt		Employee Signature	
		<input type="checkbox"/> Next <input checked="" type="checkbox"/> Second		Mo. Day <input type="checkbox"/> AM <input type="checkbox"/> PM		Employee Signature	
Date In		Mo. Day Year		Mo. Day <input type="checkbox"/> AM <input type="checkbox"/> PM		Employee Signature	
		Time In		Mo. Day <input type="checkbox"/> AM <input type="checkbox"/> PM		Employee Signature	
		Weight		Mo. Day <input type="checkbox"/> AM <input type="checkbox"/> PM		Employee Signature	
Flat Rate Envelope		Postage		Mo. Day <input type="checkbox"/> AM <input type="checkbox"/> PM		Employee Signature	
<input type="checkbox"/> Next <input checked="" type="checkbox"/> Second		Return Receipt Fee		Mo. Day <input type="checkbox"/> AM <input type="checkbox"/> PM		Employee Signature	
Military		COD Fee		Mo. Day <input type="checkbox"/> AM <input type="checkbox"/> PM		Employee Signature	
Int'l Alpha Country Code		Insurance Fee		Mo. Day <input type="checkbox"/> AM <input type="checkbox"/> PM		Employee Signature	
Acceptance Clerk Initials		Total Postage & Fees		Mo. Day <input type="checkbox"/> AM <input type="checkbox"/> PM		Employee Signature	
No Delivery				Mo. Day <input type="checkbox"/> AM <input type="checkbox"/> PM		Employee Signature	
Weekend				Mo. Day <input type="checkbox"/> AM <input type="checkbox"/> PM		Employee Signature	
HOLIDAY				Mo. Day <input type="checkbox"/> AM <input type="checkbox"/> PM		Employee Signature	
CUSTOMER USE ONLY				Mo. Day <input type="checkbox"/> AM <input type="checkbox"/> PM		Employee Signature	
METHOD OF PAYMENT				Mo. Day <input type="checkbox"/> AM <input type="checkbox"/> PM		Employee Signature	
Express Mail Corporate Acct. No.				Mo. Day <input type="checkbox"/> AM <input type="checkbox"/> PM		Employee Signature	

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TO: (PLEASE PRINT)			

EXPRESS MAIL
DATE NOT DETERMINED

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